#### Revised 06/08



## LOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A

DES MOINES, IA 50319

2000 JUL 24 PM 4: 33 Fax: (616)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowe Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest,

## FORM-GB

Glft or Bequest information received by a department or accepted by the Governor on behalf of the state

For office use only indexed		
Audited		
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#### DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Administrative Services/General Services	Enterprise, Capitol Complex Maintenance	
Name of Department or Office 109 S.E. 13th Vinc	Des Moines, Iowa 50319	
Mailing Address 515-221-9137	City, State, Zip Code	
Area Code & Telephone No.		
CONTACT PERSON FOR RECIPIENT DEPARTM	ENT OR OFFICE:	
Tim Rybum		
Name		
Maîting Address (if different from above) մաւրջեսա@iowa.gov	City, State, Zip (If different from above)	
Email Address	Area Code & Telephone Number (if different from above)	

#### **DONOR OF GIFT OR BEQUEST:**

Bob Hagins			
Name	· · · · · · · · · · · · · · · · · · ·		
4111 Ingersoll Apt#414	Des Moines, Iowa 50312		
Mailing Address	City, State, Zip Code	July 24, 2009	<b>\$0.00</b>
515-279-0152		Date of Gift or Bequest	Amouni/Value*
Area Code & Telephone Number		"value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	
Email Address (optional)			

Provide a description of the gift or bequest and purpose thereof:

Painting of the Bell of Friendship, unknown value, if guessing, \$25.00

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

### Statement of Affirmation:

Tim Rybum affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Revised 06/08

2009 JUL 24 PH 4: 32

## R8VI580 V0/U

# THI TOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 60319 Fax: (616)281-4073 www.lowa.gov/ethice



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Gift or Bequest Information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST	•		
Administrative Services/General Services Enterprise, Cap	ontol Complex Maintenance		
	Moinee, lowe 50319		
Mailing Address City 515-381-3137	r, State, Zip Code		
Area Code & Telephone No.			
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE			
Tim Ryburn			
Name			
Mailing Address (If different from above)	City, State, Zip (if different from above)		
Email Address	Area Code & Telephone Number (if different from above)		
ONOR OF GIFT OR BEQUEST:			
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Bob Hagins Name			
**************************************			
4111 Ingersoll Apt#414 Des Moines, Iowa 50312  Malling Address Cily, State, Zip Code	July 24, 2009 \$0.00		
515-279-0152			
Area Code & Telephone Number	Dale of Glit or Bequest Amount/Value*		
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Tim Dahum			
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